## NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. <b>DESCRIPTION OF PROP</b>	ERTY (Legal descrip	ption of the prope	erty & street addres	s, if available) Ta	AX FOLIO NO.:	
SUBDIVISION		BLOCK	TRACT	LOT	BLDG	UNIT
2. GENERAL DESCRIPTIO	N OF IMPROVEM	ENT:				
3. OWNER INFORMATION	OR LESSEE INFO	RMATION IF	THE LESSEE CO	NTRACTED FO	OR THE IMPRO	OVEMENT:
a. Name and address:						
b. Interest in property:						
c. Name and address of fee simp	ole titleholder (if diffe	erent from Owner	listed above):			
4. a. CONTRACTOR'S NAM	Œ:					
Contractor's address:		b. Phone number:				
5. SURETY (if applicable, a co	opy of the payment bo	ond is attached):				
a. Name and address:						
		c. Amount of bond: \$				
6. a. LENDER'S NAME:						
			b. Phone number:			
7. Persons within the State of F713.13 (1) (a) 7., Florida Statuto		Owner upon who	om notices or other	documents may b	ne served as provid	ded by Section
a. Name and address:						
b. Phone numbers of designated	persons:					
8. a. In addition to himself or herself, Owner designates copy of the Lienor's Notice as provided in Section 713.13 (1				_of		to receive
b. Phone number of person or e	ntity designated by O	wner:				
9. Expiration date of notice of contractor, but will be 1 year from						nal payment to th
WARNING TO OWNER: ANY P CONSIDERED IMPROPER PAYI PAYING TWICE FOR IMPROVE JOB SITE BEFORE THE FIRST I BEFORE COMMENCING WORK	MENTS UNDER CHAI MENTS TO YOUR PR NSPECTION. IF YOU	PTER 713, PART I OPERTY. A NOT INTEND TO OBT	, SECTION 713.13, F TICE OF COMMENC TAIN FINANCING, O	LORIDA STATU EMENT MUST B CONSULT WITH	TES, AND CAN RI BE RECORDED AN	ESULT IN YOUR ID POSTED ON T
Under penalty of perjury, I declare and belief.	that I have read the fore	going notice of cor	mmencement and that	the facts stated the	erein are true to the	best of my knowled
(Signature of Owner or Lessee, o Authorized Officer/Director/Part			(Print Name and	l Provide Signator	ry's Title/Office)	
State ofCo	unty of					
The foregoing instrument was ackn	owledged before me thi	s day	of	, 20		
by(name of p		, as	(true = = = 0 - 11 - 11	2.5 - E <sup>C</sup>		
for(name of party on behalf of wh	om instrument was ave	cuted)	(type of authority,	e.g. officer, trus	ice, attorney in fact)	)
Personally Known or Produc			cation Produced			
reisonany Known of Produc	od identification	_ 1 ype of fuentific	Cation Fioduced			
	Notary					
	•		(Signa (Print, Type, or Stamp	ature of Notary Pu Commissioned N		ic)